PTO/SB/05 (01-04)
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

spond to a concessor of information unless it displays a valid OMB control number.			
Attorney Docket No.	08859-0009C		
First Inventor	ROGERS, BRUCE A.		
Title	Adjustable Hair Holding Device		
Express Mail Label No.	ET698465095US		

See MPEP	APPLICATION ELEMENTS chapter 600 concerning utility patent application contents.	ADDRESS TO: Commission P.O. Box 145	tent Application ler for Patents 50 /A 22313-1450	
(Submit 2. X Applic See 3 Special (prefer - Desc - Cross - State - Refer or a c - Back - Brief - Brief - Detail - Claim	ransmittal Form (e.g., PTO/SB/17) it an original and a duplicate for fee processing) ant claims small entity status. 7 CFR 1.27. fication [Total Pages 23] red arrangement set forth below) rivity title of the invention is Reference to Related Applications ment Regarding Fed sponsored R & D rence to sequence listing, a table, computer program listing appendix ground of the Invention Summary of the Invention Description of the Drawings (if filed) led Description i(s) act of the Disclosure	ACCOMPANYING APP	equence Submission orm (CRF) e Listing on: R (2 copies); or dentity of above copies	
4. X Drawi 5. Oath or Dec a. X Ne b. Co (fo	ng(s) (35 U.S.C. 113) [Total Sheets8] claration [Total Sheets1] why executed (original or copy) py from a prior application (37 CFR 1.63(d)) r continuation/divisional with Box 18 completed) DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). lication Data Sheet. See 37 CFR 1.76		t Power of Attorney nent (if applicable) Copies of IDS 9 Citations MPEP 503) mized) Document(s) id) nder 35 U.S.C. 122 t attach form PTO/SB/35	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation Divisional				
Prior application information: Examiner For CONTINUATION OR DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The Incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.				
		DENCE ADDRESS		
Custor	mer Number:	OR X Corresp	ondence address below	
Name	John F. Letchford			
Address	Address Klehr, Harrison, Harvey, Branzburg & Ellers LLP			
City	260 S. Broad Street Philadelphia	State PA	Zip Code 19102	
Country		elephone 215-569-3495	Fax 215- 568-6603	
Name (Print/T)	/pe) John F. Letchfoff	Registration No. (Attorney/Agent)	33,328	
Signature			Date 1-23-2004	
This collection of	f information is required by 37 SPR 1-53(b). The information is	s required to obtain or retain a banefit by th		

This collection of information is required by 37 PR 153(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiate in governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)
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Effective 10/01/2003. Patent fees are subject to annual revision.

x Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

\$) 4	12	5
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sporta to a collection of file	armation unless it displays a valid OMB control number.
C	omplete if Known
Application Number	
Filing Date	
First Named Inventor	Rogers, Bruce A.
Examiner Name	
Art Unit	
Attorney Docket No.	08859-0009C

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)		
X Check Credit card Money Other None	3. ADDITIONAL FEES	·	
x Deposit Account:	Large Entity Small Entity		
Deposit 501555	Fee Fee Fee Fee Fee Description Fee Description	e Paid_	
Number	1051 130 2051 65 Surcharge - late filing fee or oath		
Deposit Klehr, Harrison, Harvey, Account Branzburg & Ellers LLP	1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet		
Name The Director is authorized to: (check all that apply)	1053 130 1053 130 Non-English specification		
Charge fee(s) indicated below Credit any overpayments	1812 2,520 1812 2,520 For filing a request for ex parte reexamination		
Charge any additional fee(s) or any underpayment of fee(s)	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below, except for the filing fee	1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action		
to the above-identified deposit account.	1251 110 2251 55 Extension for reply within first month		
FEE CALCULATION	1252 420 2252 210 Extension for reply within second month		
1. BASIC FILING FEE Large Entity Small Entity	1253 950 2253 475 Extension for reply within third month		
Fee Fee Fee Fee Description Fee Paid	1254 1,480 2254 740 Extension for reply within fourth month		
Code (\$)	1255 2.010 2255 1.005 Extension for reply within fifth month		
1002 340 2002 170 Design filing fee 385	1401 330 2401 165 Notice of Appeal		
1003 530 2003 265 Plant filing fee	1402 330 2402 165 Filing a brief in support of an appeal		
1004 770 2004 385 Reissue filing fee	1403 290 2403 145 Request for oral hearing		
1005 160 2005 80 Provisional filing fee	1451 1,510 1451 1,510 Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 385	1452 110 2452 55 Petition to revive - unavoidable		
	1453 1,330 2453 665 Petition to revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501 1,330 2501 665 Utility issue fee (or reissue)		
Extra Claims below Fee Paid	1502 480 2502 240 Design issue fee		
Total Claims 2 -20** = 0 X =	1503 640 2503 320 Plant issue fee		
Claims Multiple Dependent	1460 130 1460 130 Petitions to the Commissioner		
	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)		
Large Entity Small Entity Fee Fee Fee Fee Description	1806 180 1806 180 Submission of Information Disclosure Stmt		
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	8021 40 8021 40 Recording each patent assignment per property (times number of properties)	40	
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809 770 2809 385 Filing a submission after final rejection (37 CFR 1.129(a))		
1203 290 2203 145 Multiple dependent claim, if not paid	1810 770 2810 385 For each additional invention to be		
1204 86 2204 43 ** Reissue independent claims over original patent	examined (37 CFR 1.129(b)) 1801, 770 2801 385 Request for Continued Examination (RCE)		
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1801. 770 2801 385 Request for Continued Examination (RCE) 1802 900 1802 900 Request for expedited examination		
and over original patent	of a design application		
SUBTOTAL (2) (\$)	Other fee (specify)		
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 4	0	

SUBMITTED BY

Name (Print/Type)

John F. Letchaford

Registration No. (Attorney/Agent)

Signature

(Complete (if applicable))

Telephone215-569-3495

Date /-23-2004

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Certificate of Mailing under 37 CFR 1.10

I hereby certify that this PATENT APPLICATION pursuant to 37 C.F.R. §1.10 is being deposited with the United States Postal Service in an envelope as "Express Mail Post Office to Addressee," addressed to:

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Alexandria, VA 22313-1450

on James 23,2004.

Date

Signature

Anita L. Hahn

Typed or printed named of person signing Certificate